

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	LST		2-12-00
O.I.P.E. CLASSIFIER		48	7/17/00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		C 5874	8-23

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral).... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
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Original	7/12/00
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Claim	Date
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Original	7/12/00
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here